

1. Official Name of Grant Program:

Date of SBE approval of grant criteria 9/15/2000

2002 - Team Nutrition Training Grant

☐ Continuation

(years)

(title)

(type)

☒ Initial

☐ Amendment

Legislation Authorizing this Grant Program:

☒ Federal Grant CFDA Number 10.574

☐ State Grant

☐ Other (Private, Foundation)

2. Type and Purpose of Grant Program: (check one)

This funding is to deliver new and innovative training programs on the Dietary Guidelines for Americans 2000 to school and child care decision makers including teachers, school food service personnel, principals, superintendents, board members, parents and leaders of children's organizations.

☒ Competitive

☐ Formula

☐ Other

(specify)

3. SBE Priorities and Policies that this Grant Program Supports: (check all that apply)

Priorities

Policies

☐ Other

☒ Integrating Communities and Schools

☐ Bullying

☐ Elevating Educational Leadership

☐ Character Education

(specify)

☐ Embracing the Information Age

☒ Creating Effective Learning Environments

☐ Ensuring Early Childhood Literacy

☒ Family Involvement

☐ Ensuring Excellent Educators

☐ Safe Schools

4. Grant Categories (if not described in Item 2): ☒ NOT APPLICABLE

5. Target Population to be Served by Grant:

Entire State

6. Total Funds Awarded:

\$199,997

7. Eligible Applicants:

Michigan State University Extension

8. Description of Priorities Given to Any Specific Population or Location: ☒ NOT APPLICABLE

9. Grant Administration:

Office

School Support Services

Unit

Food & Nutrition Program

Contact

Susan Perkowski Anderson

Phone

517-373-2374

10. OFFICE

Office Director Approval Signature:

Susan P. AndersonDate: 0910-2002Phone: 517-373-2374

Comments:

11. BUDGET OFFICE

Budget Office Approval Signature:

N/A

Date: _____

Comments:

12. GRANTS OFFICE

Grants Office Approval Signature:

MaryAnn ChaitrakDate: 9/16/02

Comments:

Exhibits are not required.**13. DEPUTY SUPERINTENDENT**

Deputy Superintendent Approval Signature:

Carol WelenbergDate: 9-17-02

Comments:

14. SUPERINTENDENT

Superintendent Approval Signature:

Tom Stathis

Date: _____

Comments:

INSTRUCTIONS:

- A. Complete items 1-10 on this form. The Grants Administration Unit will facilitate completion of items 11-14.
- B. Attach three (3) sets of Exhibits A, B, and C.
Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested, the amount recommended, and a three to five sentence abstract of the proposal.
Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested.
Exhibit C---Map of Michigan indicating the location of recommended applicants.
- C. Attach the grant award letters for the Superintendent's signature and the non-award letters for the Service Area Director's signature. The letters should be submitted in the same order given in Exhibit A and/or B. For each final Grant Award Notification letter, a Grant Award Notification form (yellow sheet) also needs to be submitted for the Superintendent's signature.
- D. Transmit Grant Award Approval Form (pink), attachments, and letters to the Grant Administration Unit.

MICHIGAN DEPARTMENT OF EDUCATION
LANSING, MICHIGAN 48909

GRANT AWARD NOTIFICATION

1	District/Recipient Code: 33-0002550G Recipient Name: Michigan State University Extension East Lansing, MI 48824	8	District/Recipient Contact Person for Grant: Name: Patricia Hammerschmidt Position: Address: 103 Human Ecology Bldg MSUE - East Lansing, MI 48824 Telephone: 517/355-6586 E-Mail: hammersc@msue.msu.edu
2	Award Information: Source Code (Grant Number)-Project Number: TNTMSU2002 Award Type: Federal Competitive	9	Authorized Funding Activity: Original Award on 9/1/2002 - \$199,997 Current Authorized Amt. \$199,997
3	Grant Program Title: 2002 Team Nutrition Training Grant	10	Original/Amendment Notification: Original Notification
4	MDE Staff Contacts: Program Contact: Susan Perkowski Anderson 517/373-2374 Payment Contact: Dawn Harris 517/373-4335	11	Regular/Carryover Funds: Regular
5	Expenditure Period: Beginning date: September 1, 2002 Ending date: 9/30/2004	12	Method of Obtaining Payment: Expenditure Request Online at: www.meis.mde.state.mi.us
6	Final Report Due Dates: Expenditure Report: DS4044 Bi-Annual Progress Report: Bi-Annual Project Reports Final Project Reports Due: December 1, 2004	13	Administrative Information: CFDA Number: 10.553 CFDA Title: Dietary Guidelines
7	Regulation Pertaining to Award: OMB Circular A-21,A-110 and 7 CFR Part 3019	14	Authorizing Official: Date: 